

AO 440 (Rev. 12/09) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Eastern District of Pennsylvania

RUTHY VIRELLA

*Plaintiff*

v.

TRANS UNION, LLC; EQUIFAX INFORMATION  
SERVICES LLC; EXPERIAN INFORMATION  
SOLUTIONS, INC., and COLLECTO, INC., d/b/a  
EOS CCA

*Defendant*

Civil Action No. 13-5392

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)*

Collecto, Inc. d/b/a EOS CCA  
700 Longwater Drive  
Norwell, MA

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

MARK D. MAILMAN, ESQUIRE  
100 SOUTH BROAD STREET  
19TH FLOOR  
PHILADELPHIA, PENNSYLVANIA 19110

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

CLERK OF COURT

Date: SEPTEMBER 17, 2013

*Michael G. Mani*  
MICHAEL G MANI, Deputy Clerk

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**PROOF OF SERVICE***(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for *(name of individual and title, if any)* Collecto, Inc, d/b/a EOS CCA  
 was received by me on *(date)* Sept. 18, 2013.

☐ I personally served the summons on the individual at *(place)* \_\_\_\_\_  
 \_\_\_\_\_ on *(date)* \_\_\_\_\_; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* \_\_\_\_\_  
 \_\_\_\_\_, a person of suitable age and discretion who resides there,  
 on *(date)* \_\_\_\_\_, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* \_\_\_\_\_, who is  
 designated by law to accept service of process on behalf of *(name of organization)* \_\_\_\_\_  
 \_\_\_\_\_ on *(date)* \_\_\_\_\_; or

☐ I returned the summons unexecuted because \_\_\_\_\_; or

☒ Other *(specify)*: I served via certified mail; restrict delivery.  
It was signed for on 9-21-2013.

My fees are \$ \_\_\_\_\_ for travel and \$ \_\_\_\_\_ for services, for a total of \$ \_\_\_\_\_.

I declare under penalty of perjury that this information is true.

Date: 9-25-2013

Ilijana Vukas  
*Server's signature*

Ilijana Vukas, Paralegal  
*Printed name and title*

\_\_\_\_\_  
*Server's address*

Additional information regarding attempted service, etc:

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature  <input checked="" type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:  Officer  Collector, Inc. d/b/a EOS CCA  700 Longwater Drive  Norwell, MA</p>		<p>B. Received by (Printed Name)  L. Abreu</p>	<p>C. Date of Delivery  9/13</p>
		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES, enter delivery address below: <input type="checkbox"/> No</p>	
		<p>3. Service Type  <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input checked="" type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
		<p>4. Restricted Delivery? (Extra Fee) <input checked="" type="checkbox"/> Yes</p>	
<p>2. Article Number  (Transfer from service label)</p>		<p>7011 2000 0002 6847 3652</p>	
PS Form 3811, February 2004		Domestic Return Receipt	
		102595-02-M-1540	